12030910146

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED 7

2012 OCT 16 AM 8: 44

POPOPUM AN CENTER

1.	NAME OF T COMMITTEE (in full)		TYPE OR PRINT ▼			Example: If typing, type over the lines.			12FE4M5			
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ADDRESS (number and street)												
Check if different than previously reported. (ACC)			Bus	linge	a _i mie i			C.A.	940	10-		
2.	FEC IDI	ENTIFICATION NU	JMBER ▼	. 	CITY A			STATE A		ZIP COD	DE A	
	CO	05224	10	3	B. IS THIS REPORT		NEW (N) OR		AMENDED (A)			
4.	(Choose	OF REPORT One)		port 🖳	Feb 20 (M2) Mar 20 (M3)		May 20 (M5 Jun 20 (M6)	: 발	Aug 20 (M8) Sep 20 (M9)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election	
		April 15 Quarterly Report (Q July 15 Quarterly Report (Q October 15	(c)	12-Day PRE-Election Report for the	[:= :]	Primary (12	5	ا <u>نا</u> انا	Oct 20 (M10) neral (12G)		Year Only) Jan 31 (YE) Runoff (12R)	
		Quarterly Report (C January 31 Year-End Report (Y July 31 Mid-Year	Έ)		ection on	M-V-M	۱ [ورو] ۱			in the State of		
		Report (Non-electio Year Only) (MY) Termination Report (TER)	n (d)	30-Day POST-Election Report for the	Ľ <u>-</u> 1	General (3		Rur	noff (30R)	in the	Special (30S)	
	رجيا	(TETT)		EI	ection on			<u></u>		State of		
5.	Covering	Period \mathcal{D}	7 / 8	1 20	1,2	through	0,4		20	12		
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Report and to the best of my knowledge and belief it is true, correct and complete.												
Signature of Treasurer Date Date												
L	Off	ssion of false, errond fice se nly	eous, or inc	omplete inform	ialion may st	inject the po	erson signing	ulis Hepor	FEC	FOR Rev. 12/20	M 3X	